PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/588,195		Filing Date 04/25/2007		To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
	FOR	N	NUMBER FILED		JMBER EXTRA	П	RATE (\$)	FEE (\$)	\blacksquare	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b), c	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i), o		N/A		N/A	1	N/A			N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x s = 1		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))			inus 3 = *		1	x \$ =			x s =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 tional 50 s	ngs exceed 100 ion size fee due i) for each on thereof. See 7 CFR 1.16(s).							
	MULTIPLE DEPEN	NDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))]]		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								J	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN R SMALL ENTITY	
AMENDMENT	09/16/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ĭ	Total (37 CFR _1.16(i))	· 22	Minus	22	= 0]	x \$ =		OR	X \$52=	0
۲ļ	Independent (37 CFR 1.16(h))	• 3	Minus	3	= 0]	X \$ =		OR	X \$220=	0
ΙΝ	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
L		(Column 1)		(Column 2)	(Column 3)						
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
핆	Total (37 CFR 1,16(i))		Minus]	x \$ =		OR	X \$ =	
AMENDMENT	Independent (37 OFR 1 16(h))		Minus	***	-]	X \$ =		OR	X \$ =	
Z.	Application Size Fee (37 CFR 1.16(s))]]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))]			OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN THIS SPACE is less than 5, enter "3".											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, pocess an application. Conhocintality is governed by St. U.S. v. 122/int 1.7 CHY 1.14. This collections seating that the 12 mixture to compare, including gathering exquired complete in form and or seagestone for reducing this burden, should be sent to the Child Information Office. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450.